

PART B – FEES(S) TRANSMITTAL

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27160 7590 07/28/2005

Patent Administrator
 KATTEN MUCHIN ROSENMAN, LLP
 525 West Monroe Street
 Chicago, IL 60661-3693

10/31/2005 MBEYENE2 00000183 501710 09954495

01 FC:1501 1400.00 DA
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	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/954,495	09/10/2001	Bruce R. Woodley	M-12004-US 215248.00004	8573

TITLE OF INVENTION: WAVELENGTH AGILE LASER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/28/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
RODRIGUEZ, ARMANDO	2828		372-038050		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer No. is required.

2. For printing on the patent front page, (1) list the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 KATTEN MUCHIN ROSENMAN, LLP

2 _____

3 _____

3. Assignee name and residence data to be printed on the patent

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SAN JOSE SYSTEMS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, CA

Please check the appropriate assignee category/categories (will not be printed on the patent) individual corporation/other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee

Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed

Payment by credit card. A Credit Card Authorization Form is being filed herewith.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1710 (a duplicate copy of this sheet is attached hereto)

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY STATUS. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid Issue Fee to the application identified above.

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Authorized Signature:

Typed or printed name:

Mark W. Hrozencik

Date: 10/28/2005

Registration No.: 45,316

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